

219 North Main Street, Suite 402 Barre, VT 05641 (p) 802-479-1030 | (f) 802-479-1835

Confidential Data Request / Scope of Work Application General Guidance

The Vermont Agency of Education (AOE) has developed a process whereby external requestors of confidential data may ask for access to extant data to conduct research projects or evaluations germane to public education. Entities seeking access to confidential or personally identifiable AOE data must first meet the overarching requirements of: 1) conducting research and or evaluation, and 2) the project must have legitimate educational interest.

Request Process

All individuals or organizations requesting access to such data must complete this "Confidential Data Request & Scope of Work" application and submit it to the Vermont Agency of Education for review. Please complete each section of the application fully. Completed requests will be reviewed in the order they are received.

If the project is approved and the data requested are available, a contractual agreement will be developed and must be signed prior to the release of any potentially identifiable student data.

In the event a request is rejected, specific reasons shall be given and, if appropriate, may include information concerning possible remediation. Requests may be rejected if information on the application form is incomplete. In general, if approved, data release to the requestor will occur within 90 business days from the time of the Vermont Agency of Education's approval.

Please submit any questions you might have about this process to the AOE Information Officer at: <u>AOE.InfoOfficer@vermont.gov</u>

Please submit your completed application to the AOE Information Officer at: AOE.InfoOfficer@vermont.gov

Confidential Data Request / Scope of Work Application

Section I. Contact Information

Name of Requestor:		
Title of Requestor:		
Organization (If applicable):		
Phone Number:		
Email Address:		
Address:		
City:		
State:		
Zip Code:		
Today's Date:		
work would fall under: If you see: http://ptac.ed.gov/sites/ FERPA Studies Exception for a dmin 2. Administer student aid programmers. Improve instruction	ister predictive tests grams	-
or 		
FERPA Audit or Evaluation E	-	
	or State supported education program th Federal legal requirements that relate to a program	l
FERPA Authorized Represen	tative for PII requests:	
Please designate an "authorize	ed representative" for this project:	

Basic Document Template (Revised: April 15, 2016)

Section II. Project Information

1.	What is the title of your project?
2.	Please provide a brief overview/scope and objectives of your project (e.g. an abstract.) Please summarize objectives succinctly. If you have hypotheses you will be testing, please list them here:
	Data Loan Poriod Estimate data loan period for using the data set and when it will be destroyed
ο.	Data Loan Period – Estimate data loan period for using the data set and when it will be destroyed. Project Start Date: Project End Date:
	Additional Information regarding loan of data period:



r.	source(s) and amount(s) of the funding.
	Section III. Benefits of the Project
1.	What potential benefits will this project have for the Vemont Agency of Education, our local school systems, educators, policy makers, or researchers?
	What are the anticipated benefits of the proposed project to the project participants?
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Section IV. Design

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d to ad nsure t	the below, please describe the design of the proposed project and the methodology to dress each of the aforementioned project / research / evaluation questions. Use enother Vermont Agency of Education can assess the extent to which your proposed probjectives you have provided in Section II of this application. Describe the population

Section V. Data Requested

To the best of your ability, please list the data elements you are requesting in order to complete the proposed project. For each data element, please also list the unit(s) of analysis for your work (e.g., student, school, district, SU/SD, state, etc.) and the school year(s) for which you are requesting data.

Requestor to provide: (if applicable, list of the control group, cohort(s), subgroup(s), student names, for matching purposes, etc.):

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Requestor seeks access to the following AOE data:

Data Element(s) (e.g. grade level, gender, FRL status, Race, IEP status, etc.)	Unit(s) of Analysis (e.g. student, school, SU/SD, State, etc.)	School Year(s) for which Data are being Requested

Section VI. Proposed Data Collection Instruments/Protocols

1. If you intend to deploy additional data collection instruments/protocols (e.g. surveys, etc.) as part of your project, please list them below including the sample from whom you intend to collect this information. Draft versions of these data collection instruments, if available, should be attached to this application.

	Proposed Data Collection Instruments/Protocols				
	Instrument/Protocol	Audience	Notes		
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Section VII. Human Subjects Protection

1.	How will Institutional Review Board (IRB) approval be addressed in the proposed project? If your project	t
	has already been approved by an IRB, or if an IRB has designated your project to be "exempt," please	
	provide evidence of the IRB's review and or decision. If you do not plan to conduct an IRB review, please	À
	indicate why this project does not meet the definition of "human subject research."	
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Name:		Job Title:		
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2. Please list the names and titles of the people who will have access to the data you are requesting:

Section VIII. Data Stewardship, Security, and Destruction Information

1.	internal controls to protect the VT AOE data you are procedures used to <u>manage data collections</u> , <u>process</u> about requirements related to <u>encryption</u> , <u>where (experiments)</u>	ip and security policy and the procedures that provide requesting. Please be specific about the processes and sing, storage, use, and destruction. Please be specific g. environment/platform) the data will be hosted, event unauthorized access. Please use attachments if
	necessary to provide full documentation for this sect	ion.
2.	Please list the name and job title of the person(s) who of the data you are requesting:	o will be designated to oversee the privacy and security
	Name:	Job Title:

Section IX. Work Products

For each anticipated work product, please provide the following information:

Work Product (e.g. Year1, Final Report, PowerPoint slides for conference presentation, etc.)	Audience	Anticipated Completion Date	Dissemination Plans

Section X. Signature(s) of Applicant(s)

Name of Requestor, (printed)	Title
Signature	Date
Institution	E-mail and Phone Number (area code and extension)